## **Application Data Sheet**

Application Information Application Type::	Regul	ar
Subject Matter::	Utility	,
Suggested Classification::		
Suggested Group Art Unit::		
CD-ROM or CD-R?::	None	
Title::	Minin	nally Invasive Bone Miller Apparatus
Request for Early Publication	n?::	No
Request for Non-Publication	?::	No
Suggested Drawing Figure::	1	
Total Drawing Sheets::	9	
Small Entity::		No
Petition included?::		No
Secrecy Order in Parent App	1.?::	No
Applicant Information		
Applicant Authority type::		Inventor
Primary Citizenship Country	:	US .
Status::	Full C	apacity
Given Name:	Micha	el J.
Family Name::	Christi	e e
City of Residence::	Nashv	ille
State or Province of Residence	e::	TN

Country of Residence:: US

Street of mailing address:: 911 Tyne Boulevard

City of mailing address:: Nashville

State or Province of mailing address:: TN

Postal or Zip Code of mailing address:: 37220

**Applicant Information** 

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name: David K.

Family Name:: DeBoer

City of Residence:: Franklin

State or Province of Residence:: TN

Country of Residence:: US

Street of mailing address:: 4080 Clovercroft Road

City of mailing address:: Franklin

State or Province of mailing address:: TN

Postal or Zip Code of mailing address:: 37067

**Applicant Information** 

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name:

Michael C.

Family Name::

Jones

City of Residence::

North Webster

State or Province of Residence::

IN

Country of Residence::

US

Street of mailing address::

205 North Short Street

City of mailing address::

North Webster

State or Province of mailing address::

 $\mathbb{N}$ 

Postal or Zip Code of mailing address::

46555

**Applicant Information** 

Applicant Authority type::

Inventor

Primary Citizenship Country:

US

Status::

Full Capacity

Given Name:

Steven Wayne

Family Name::

Smith

City of Residence::

Fort Wayne

State or Province of Residence::

IN

Country of Residence::

US

Street of mailing address::

2121 Caravelle Drive

City of mailing address::

Fort Wayne

State or Province of mailing address::

IN

Postal or Zip Code of mailing address::

46814

App]	licant	Inform	ation

Applicant Authority type:: Inventor Primary Citizenship Country: US Status:: Full Capacity Given Name: Brad Alan Family Name:: Parker City of Residence:: Warsaw State or Province of Residence:: INCountry of Residence:: US Street of mailing address:: 23 EMS Lane C-14 City of mailing address:: Warsaw State or Province of mailing address:: INPostal or Zip Code of mailing address:: 46582 **Applicant Information** Applicant Authority type:: Inventor Primary Citizenship Country: US Status:: **Full Capacity** Given Name: Charles W. Family Name:: Jaggers City of Residence:: Warsaw State or Province of Residence:: IN

US

Country of Residence::

Street of mailing address:: 1538 S. Meadow Drive

City of mailing address:: Warsaw

State or Province of mailing address:: IN

Postal or Zip Code of mailing address:: 46580

**Applicant Information** 

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name: Derek A.

Family Name:: Shrack

City of Residence:: Leesburg

State or Province of Residence:: IN

Country of Residence:: US

Street of mailing address:: 6262 Edgewood Ct.

City of mailing address:: Leesburg

State or Province of mailing address:: IN

Postal or Zip Code of mailing address:: 46538

**Applicant Information** 

Applicant Authority type:: Inventor

Primary Citizenship Country: US

Status:: Full Capacity

Given Name: James Ray

Family Name::

Rogers

City of Residence::

Winona Lake

State or Province of Residence::

IN

Country of Residence::

US

Street of mailing address::

1911 Park Avenue

City of mailing address::

Winona Lake

State or Province of mailing address::

IN

Postal or Zip Code of mailing address::

46590

## **Correspondence Information**

Correspondence Customer Number:: 28078

Name::

Paul J. Maginot

Street of mailing Address::

111 Monument Circle, Suite 3000

City of mailing Address::

Indianapolis

State or Province of mailing address::

IN

Country of mailing address::

US

Postal or Zip Code of mailing address::

46204-5115

Phone number::

317-638-2922

Fax number::

317-638-2139

E-mail address::

pjmaginot@maginot.com

## Representative Information

Representative Customer Number:	
	28078

## **Domestic Priority Information**

Application::	Continuity Type:	Parent Application::	Parent Filing Date::